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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

*Name HP*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*Name HP*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NY	SHEETS DRAWING 9	TOTAL CLAIMS 68 87	INDEPENDENT CLAIMS 7/11
Verified and Acknowledged Examiner's Signature <i>HP</i> Initials					

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## TITLE

1:N PROTECTION IN AN OPTICAL TERMINAL

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